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IN HONOR OF THE 20th ANNIVERSARY
OF THE VICTORY OVER FASCIST GERMANY

Zhurnal Mikrobiologii,

Epidemiologii I

Immunobiologii

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No. 5, 1965, pp. 24-28

I. I. Rogozin

The peoples of the Soviet Union, of the socialist countries, and the working people the world over celebrate a historical date -- the 20th anniversary of the victory over Fascist Germany. For this reason, it is important precisely now to describe to the young physicians and remind the medical workers of those years of the great and noble work of the physicians, of the secondary and junior medical personnel in preventing epidemics in the country during the years of the Great Fatherland War and the measures for the prevention of epidemics in the Soviet Army and Navy.

Above all, let us recall the circumstances which existed in the country at the beginning of the Great Fatherland War (we have had the opportunity to describe this data in greater detail together with B. S. Bessmertnyy.¹

At that time, control of epidemics considerably improved, as the national economy grew. The organization of sanitary-anti-epidemiological establishments had been completed. By the end of 1940, the country had 1,760 sanitary-epidemiological stations and 2,021 disinfection establishments with 1,406 sanitary-bacteriological laboratories.

¹ Experience of Soviet Medicine in the Great Fatherland War, 1941-1945, Vol. XXXII, Section I, pp. 21-31.

Prophylactic and anti-epidemic work was done not only in sanitary-anti-epidemiological establishments. The general public health network also took part in the work. The number of public health establishments considerably increased in cities and villages. As a result, in 1940, each new medical sector in the rural areas serviced, at an average, half the number of population as it did in 1928. The overall number of beds for infectious diseases was also higher. This provided the necessary facilities for hospitalization.

Population immunization against an entire series of infectious diseases became quite widespread: against smallpox, diphtheria, typhoid and paratyphoid fevers, etc. In this connection, the work of the epidemiological and microbiological institutes and their productive capacity expanded. The scientific work of epidemiologists, microbiologists and infectious diseases specialists was aimed at resolving major infection and immunity problems.

By then, the morbidity rate of many infectious diseases had been considerably lowered. Some of them (cholera, smallpox, and relapsing fever carried by lice) had been eliminated.

However, the fact that many diseases had become rarer was no guarantee against their possible expansion in the case of worsened living conditions. This applied, above all, to spotted fever, malaria and intestinal infections.

The perfidious attack launched by the fascist aggressors against the Soviet Union on 22 June 1941 raised the task of anti-epidemiological work in the country and the prevention of dissemination of diseases in the army and navy to the level of a most important task. This was even more necessary since, with the beginning of military operations, very complex sanitary-epidemiological circumstances developed in the country.

Above all, there was a substantial change in the medical personnel. A large number of the most active and best trained physicians from the medical-prophylactic network and the specialized anti-epidemiological institutions were mobilized. The mass migration of the population began. Many enterprises, workers and their families were evacuated to the eastern areas of the country, in the Urals, in Siberia, in Central Asia. At the same time, the unorganized population as well was moving east. Troops were moving from the eastern into the western areas. The crowded train compositions and railroad stations resulted in great delays for the people on the move and to the worsening of available

services. The situation of the places where the evacuated population arrived was also rather complex: housing and communal services could not be provided. The local party and soviet organs and the public health organs did a great deal of work to insure the anti-epidemiological safety of the evacuated population. However, the morbidity indices in the eastern areas worsened.

The population migration continued during the war as well. In 1943, as a result of the liberation of many temporarily occupied areas, a mass reevacuation of the population began, which continued until the end of the war. In 1945, this was augmented by the migration and resettlement of repatriated population from Germany where, at that time, a severe epidemic of intestinal diseases was taking place.

Particularly complex epidemiological circumstances developed during the second period of the war. In the areas which were being liberated from temporary occupation, the fascist barbarians destroyed houses, hospitals, communal establishments, leaving behind them ruins with a large number of people sick with contagious diseases. Thus, about one million house buildings were destroyed in the occupied areas of the RSFSR. One hundred eleven hospitals with 5,700 beds or 85% of the entire former bedding facilities, all polyclinics, children's institutions, the entire network of sanitary-epidemiological stations and sanitary-bacteriological laboratories were destroyed in Leningradskaya Oblast. As was reported by the Minister of Health Ukrainian SSR P. Shupik¹, the fascist vandals caused a tremendous damage to the national economy of the Ukraine -- cities and villages were in ruins, factories and plants were inoperative, 16,000 medical and sanitary establishments were destroyed and plundered, amounting to the almost entire medical network created in the republic during the years of the Soviet regime. In the Belorussian SSR 20 cities and city-type settlements and 9,200 villages were destroyed and burned; 176 hospitals, 300 outpatient-polyclinic institutions, 25 feldsher-midwife centers, 30 city sanitary-epidemiological stations and most of the nurseries in the cities had been destroyed. The water and sewage facilities in the occupied territories were inoperative and the population had to use water from exposed water reservoirs.

¹
Meditsinskaya gazeta (Medical Gazette), 13 October 1964.

No more than a minimum medical help was offered to the population of all those territories. No sanitation or anti-epidemiological measures were implemented. Free medical aid was abolished. All this, even the difficult general circumstances, led to an increased number of cases of contagious diseases.

In the course of the liberation of the temporary occupied areas, we encountered epidemics of spotted fever, a considerable increase in the number of cases of malaria, intestinal infectious diseases, skin and venereal, and other diseases.

The circumstances became more complex also because of purposeful dissemination of epidemic diseases by the fascist aggressors. That was the case in 1942 when centers of acute intestinal diseases were set up in Zimovniki in Rostovskaya Oblast; in 1943, near Rzhev, in Kalininskaya Oblast, the aggressors left behind camps with people sick with spotted fever; the same thing occurred in 1944 in Belorussia (Azarichi Village, Vasilevicheskiy Rayon) where a camp was left behind with 30,000 civilians, including thousands of spotted fever cases. Measures had to be taken to prevent the dissemination of the infectious diseases to the other areas of the country.

The implementation of this task was carried out mainly by the party and soviet organizations and the public health authorities. Throughout the country and, above all, in the liberated oblasts and rayons, the special anti-epidemiological commissions were set up, headed by the chairman or the deputy chairman of the corresponding soviet. Their first duty was the restoration of homes, communal establishments and public health authorities in the liberated areas. A particularly important task facing the anti-epidemiological commission was the organization and implementation of measures to fight morbidity. With this in mind, additional beds were provided for the infectious diseases hospitals, setting up temporary hospitals and the transfer of beds from the somatic to the infectious diseases hospitals. Daily operative telegraph information on the state of morbidity was organized.

The medical service of the Soviet army rendered great help in restoring the network of medical-prophylactic establishments in the areas liberated from temporary occupation. This covered not only the organizational activities but, in many cases, by permission of the medical service command, direct material help was given in anti-epidemiological operations. Thus, in the Belorussian SSR, a temporary loan was made to hospitalize the infectious diseases cases from the

civilian population of ten military hospitals from December 1943 to April 1944; the military-medical service of one of the fronts treated 148,000 people, disinfected 534,000 objects, set up 7 hospitals and 6 isolation wards, hospitalized almost 100% of all the spotted fever cases, trained from the local population 1,560 voluntary sanitary inspectors, gave 5,800 lectures to the population, gave 27,500 kilograms of soap, 380 kilograms of K soap, 6 disinfection units, 30 liters of spotted fever vaccine, etc. (Boldyrev and Yelkin).¹

The population took active part in exposing and hospitalizing cases of infectious diseases. Voluntary sanitation representatives were specially trained for the purpose (one person per ten farmsteads in the villages or per ten homes in the cities), whose duty it was daily to visit homes and report to public health establishments of any cases found out. Physicians checked the patients, made the diagnosis and decided whether or not the patients needed hospitalization. Furthermore, in 1944, over 1,500 special units were set up for anti-epidemic work.

Of great importance in anti-epidemiological work was the participation taken by the entire medical-prophylactic network of public health establishments. Workers of polyclinics providing home service had the duty to organize the initial anti-epidemic measures around the patients stricken with infectious diseases. The workers of the sanitary-anti-epidemiological establishments had particularly complex duties. They were directly in charge of sanitary-anti-epidemiological work and insured the training of physicians from the general public health network on matters of early diagnosis of infectious diseases and initial anti-epidemiological measures.

Extensive work was done on the disinfection of centers of epidemics and in the field of prophylactic disinfection. This covered, above all, the sanitary processing of people in contact with cases of spotted fever, and the disinfection of centers of the disease. No less extensive was the work on disinfection of centers of intestinal diseases. To this effect, together with the centralized supplying of the

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Experience of Soviet Medicine in the Great Fatherland War, 1941-1945, Vol. XXXII, Section 1, p. 99.

republics with disinfection facilities, a great deal of work was done on the spot for the finding and use of local resources. Extensive work was done in the deratization of tularemia centers. These last measures were quite important since the unharvested grain which had remained in the fields during the first period of the war had contributed to the mass multiplication of rodents. This could have led to the extensive dissemination of tularemia epizootics. The deratization was organized by the network of anti-tularemia and other establishments:

During the years of the Great Fatherland War, extensive anti-epidemiological work was done by the specialists of the Institutes of Epidemiology and Microbiology, and the other scientific institutions of the USSR. Particularly great attention was paid to developing aspects of specific prophylaxis. In 1938 already, the question of the active immunization against tetanus had been essentially resolved. Following the use of this type immunization, it was possible to protect the wounded from tetanus. This was one of the most important achievements of Soviet science. At the beginning of the Great Fatherland War the problem of active immunization against spotted fever was solved. As a result of such immunizations, mortality among those inoculated substantially dropped. However, they had little effect upon the drop in morbidity. In 1942 a vaccine against tularemia, exceptionally effective, was developed. The system of prophylactic measures against intestinal diseases made a great deal of progress. Extensive work was also done on the use of multiple drugs. This applied, above all, to the use of multiple vaccines against typhoid fever and tetanus.

At the same time, the production of prophylactic compounds by the institutes of epidemiology and microbiology drastically increased.

During the Great Fatherland War, extensive work was done on the expanding of general sanitation measures. This covered both the cleaning of settlements as well as the considerable improvement in water supplying. At the beginning of the war only 37% of the water pipes had zonal sanitary protection. By the end of the war, such zones had been set up to cover 81.2% of all water conduits.

Thus, despite the very complex epidemiological circumstances in the country, particularly in the liberated areas, we were successfully preventing epidemics and their dissemination in the army. All this was the result of the heroic work done by the medical workers of the Soviet Union.

The experience gained during the Great Fatherland War was successfully used in the post-war years. The sanitary consequences of the severe war were eliminated far more quickly than after the Civil War. It should be borne in mind, in this connection, that after the war considerable aid had to be rendered in the organization of anti-epidemiological measures in many people's democracies.

Serious successes were achieved in the post-war years. The growth of the material welfare of the USSR population, the constant help given by the party and soviet organs and the work of the public health authorities led to the drastic change of the epidemiological circumstances in the country. Data was quoted at the 14th Congress of Epidemiologists, Microbiologists and Infectious Diseases Specialists on morbidity for the previous five years. During that time, malaria was entirely wiped out in the country (there are no more than sporadic cases coming from the outside). Great successes have been achieved in the struggle against polio, morbidity of which during the past five years has dropped over 25.5 times. There has been a drastic reduction in morbidity of diphtheria (14 times) and, in many places, it is not encountered at all or else sporadic cases are found. A great change has occurred in whooping cough morbidity: during the past five years it has dropped by 58.6%. The same applies to brucellosis (a drop of 45.4%). All this points out to what remains to be done for the further drop in infectious diseases and the elimination of many diseases.

The heroic work done by the medical workers during the Great Fatherland War is a proof of the great possibilities of the country and creates the assurance that the tasks facing the public health authorities in peacetime will be carried out with honor.